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Bib Data Sheet

CONFIRMATION NO. 1945

<b>SERIAL NUMBER</b> 09/964,607	<b>FILING DATE</b> 09/28/2001 <b>RULE</b> <i>CU</i>	<b>CLASS</b> 382	<b>GROUP ART UNIT</b> 2621	<b>ATTORNEY DOCKET NO.</b> 11822-2						
<b>APPLICANTS</b> Gang Sun, St. Catherines, CANADA; <i>CU</i>										
<b>** CONTINUING DATA *****</b> THIS APPLN CLAIMS BENEFIT OF 60/236,945 09/28/2000 <i>CU</i>										
<b>** FOREIGN APPLICATIONS *****</b> <i>CU</i>										
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED.. SMALL ENTITY ..</b> <b>** 10/25/2001</b>										
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after met <i>CU</i> Verified and <i>CU</i> Acknowledged <i>CU</i> Examiner's Signature Initials		<b>STATE OR COUNTRY</b> CANADA	<b>SHEETS DRAWING</b> 17	<b>TOTAL CLAIMS</b> 52	<b>INDEPENDENT CLAIMS</b> 2					
<b>ADDRESS</b> <div style="text-align: right;">AIR MAIL</div> Bhupinder S. Randhawa Bereskin & Parr Box 401 40 King Street West Toronto, ON M5H 3Y2 CANADA										
<b>TITLE</b> Method of calculating shading correction coefficients of imaging systems from non-uniform and unknown calibration standards										
<b>FILING FEE RECEIVED</b> 643	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: <table border="1" style="float: right;"> <tr><td><input type="checkbox"/> All Fees</td></tr> <tr><td><input type="checkbox"/> 1.16 Fees ( Filing )</td></tr> <tr><td><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )</td></tr> <tr><td><input type="checkbox"/> 1.18 Fees ( Issue )</td></tr> <tr><td><input type="checkbox"/> Other _____</td></tr> <tr><td><input type="checkbox"/> Credit</td></tr> </table>				<input type="checkbox"/> All Fees	<input type="checkbox"/> 1.16 Fees ( Filing )	<input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )	<input type="checkbox"/> 1.18 Fees ( Issue )	<input type="checkbox"/> Other _____	<input type="checkbox"/> Credit
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